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APPLICANTS
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**** CONTINUING DATA *******
 This application is a DIV of 10/413,661 04/15/2003 which is a CIP of 09/199,586 11/25/1998 ABN which claims benefit of 60/066,597 11/26/1997
 OK PM 6/19/06

**** FOREIGN APPLICATIONS *******
 none PM 6/19/06

IF REQUIRED, FOREIGN FILING LICENSE GRANTED SMALL ENTITY ****
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Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance PM 6/19/06 Examiner's Signature Initials	STATE OR COUNTRY WA	SHEETS DRAWING 0	TOTAL CLAIMS 2	INDEPENDENT CLAIMS 1
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TITLE
 Antibody to mammalian cytokine-like polypeptide-10

FILING FEE RECEIVED 510	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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